

U.S. Department of Justice  
United States Marshals Service

# PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF JAMES E. SHELTON DBA FINAL VERDICT SOLUTIONS	COURT CASE NUMBER 1:17-mc-8-nlh
DEFENDANT CAPITAL ADVANCE SOLUTIONS, LLC	TYPE OF PROCESS Writ of Execution

**SERVE AT** NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  
CAPITAL ADVANCE SOLUTIONS, LLC  
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)  
8025 Black Horse Pike Suite 400, West Atlantic City, NJ 08232

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW  James E. Shelton 316 Covered Bridge Road King of Prussia, PA 19406	Number of process to be served with this Form 285	1
	Number of parties to be served in this case	1
	Check for service on U.S.A.	2017 MAY 1 A 10:37

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Alternate address: 1715 State Rt 35 Suite 302, Middletown, NJ 07748 (corporate headquarters)  
Telephone Numbers: 732-865-8050 (corporate number), 1-866-995-7272 (secondary number).  
Charles Betta, CEO: 732-291-5375

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Signature of <del>any</del> other Originator requesting service on behalf of: James E. Shelton	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 484-626-3942	DATE 4/6/17
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## SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. A50	District to Serve No. A50	Signature of Authorized USMS Deputy or Clerk <i>[Signature]</i>	Date 4/12/17
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I hereby certify and return that ☒ I have personally served, ☐ I have legal evidence of service, ☐ I have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above) Brian Strahl Manager	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date 5/2/17 Time 2:16 <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy <i>[Signature]</i>

Service Fee 195-	Total Mileage Charges including endeavors 63.28	Forwarding Fee	Total Charges 258.28	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS:

**DISTRIBUTE TO:**

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED